5-12-87 1

Department of Health Services Toxic Substances Control Division Sacramento, California

Lie	ase print or type. (roun designed for use on enter (re-prior) type writery	fanifest	2. Pag	e 1 Informa	tion in	the shaded areas	
4	WASTE MANIFEST CI AI DI GI OI 8 3 0 2 9 0 3 0 10		of	1 is not law.	requi	red by Federal	
П	Generator's Name and Mailing Address TRANS AUTO LEASING & SALES ATTN: BODY SHOP MANAGER—			A State Manifest Document Number			
	3311 SAN FERNANDO ROAD LOS ANGELES, CA 90065 Generator's Phone () 213-257-7900 Transporter 1 Company Name 6. US EPA ID Number			86159431 B. State Generator's ID			
H				C. State Transporter's ID 705215			
li	HAZCO INTERNATIONAL, INC.			D. Transportor's Phone 800-237-1333			
Н	7. Transporter 2 Company Name 8. US EPA ID Num	ber		le Transporter's I			
П	Designated Facility Name and Site Address 10. US EPA ID Number			nsporter's Phone ta Facility's ID			
l							
1	OMEGA RECOVERY SERVICE			C A D O 4 2 2 4 5 0 0 1 H. Feolity's Phone			
	12504 E. WHITTIER BLVD. WHITTIER, CA 90602 C A D O 4 2 2 4 15 O O 1						
П		1 12 Contai				14. Unit Wt/Vol Waste No.	
П	11. US DOT Description (Including Proper Shipping Name, Hezerd Class, and ID Number)	No.	Туре	Quantity	Wt/Vol	Waste No.	
٥	a. WASTE PAINT RELATED MATERIAL,				G	214	
N	FLAMMABLE LIQUID, NA 1263	001		45	G	214	
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П	J. Additional Descriptions for Materials Listed Above K. Handling Codes for Westes Listed Abova						
H							
H							
Ш							
	15. Special Handling Instructions and Additional information						
H	GLOVES, GOGGLES PROTECTIVE CLOTHING						
	16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations. Unless I am a small quantity generator who has been exempted by statute or regulation from the duty to make a waste minimization certification under Section 3002(b) of RGA, I also certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and I have selected the method of treatment, storage, or disposal currently available to me which						
minimizes the present and future threat to numan health and the environment.						Month Day Year	
Ų	Printed/Typed Name Signature Signature		\leq			114 RET	
T 17. Transporter 1 Acknowledgement of Receipt of Materials Printed/Typed Name S TOPERT J CIR INVICTORY Signature Light (Light Month)							
						Month Day Year	
						T BI MINIT	
lò	18. Transporter 2 Acknowledgement of Receipt of Materials	_//				Month Day Year	
1	Printed/Typed Name Signature						
F	19. Discrepancy Indication Space						
ŀ							
ļ	20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
1	Printed (Typed Name): Signature 1						
ĺ	Biscut Vives	5000	t (1 Star	_	1 161 131817	